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**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLICATION IS A CIP OF 09/536,163 03/25/2000  
JL

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
REPUBLIC OF KOREA 1999-10172 03/25/1999  
JL

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
\*\* 01/04/2002

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> KOREA, REPUBLIC OF	<b>SHEETS DRAWING</b>	<b>TOTAL CLAIMS</b> 4	<b>INDEPENDENT CLAIMS</b> 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: _____				

**ADDRESS**  
SHAHAN ISLAM, ESQ.  
ROSENMAN & COLIN LLP  
575 Madison Avenue  
New York, NY 10022-2585

**TITLE**  
Rapidly disintegrable tablet for oral administration

<b>FILING FEE RECEIVED</b> 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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